

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS  | ID NO.       | DATE              |
|---------------------------|-----------|--------------|-------------------|
| FEE DETERMINATION         | <i>HS</i> |              | <i>01/09/2000</i> |
| O.I.P.E. CLASSIFIER       |           | <i>12</i>    | <i>1/9</i>        |
| FORMALITY REVIEW          | <i>LH</i> | <i>60105</i> | <i>6-26-00</i>    |
| RESPONSE FORMALITY REVIEW | <i>LH</i> | <i>60105</i> | <i>2-7-00</i>     |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim          | Date          |
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| Final Original |               |
| 1              | <i>3/9/01</i> |
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If more than 150 claims or 10 actions  
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